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Bib Data Sheet

CONFIRMATION NO. 7716

<b>SERIAL NUMBER</b> 09/832,365	<b>FILING DATE</b> 04/10/2001 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3736	<b>ATTORNEY DOCKET NO.</b> 279.280US1	
<b>APPLICANTS</b> Avram Scheiner, Vadnais Heights, MN; Douglas R. Daum, Oakdale, MN;  <b>** CONTINUING DATA *****</b> <i>JO</i>  <b>** FOREIGN APPLICATIONS *****</b> <i>JO</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 06/04/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Frances P. O'Keefe</i> Acknowledged <i>JO</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 10	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 9
<b>ADDRESS</b> SCHWEGMAN, LUNDBERG, WOESSNER & KLUTH, P.A. P.O. Box 2938 Minneapolis, MN 55402					
<b>TITLE</b> Cardiac rhythm management system for hypotension					
<b>FILING FEE RECEIVED</b> 1500	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		